MONTANA LAW ENFORCEMENT ACADEMY

INSTRUCTIONS TO THE APPLICANT:

The information you provide in this Personal History Statement will be used to assist in determining your suitability for acceptance into the Montana Law Enforcement Academy Pre-Service Program. An extensive background investigation will be conducted into your personal history prior to any formal acceptance. Your background information will be submitted to the Administrator or his designee. Based upon the results of this investigation, you may then be given a course start date.

Keep in mind that:

- > The completion of this questionnaire is mandatory as authorized by 7-32-303 (e) Montana Code Annotated.
- All statements are subject to verification.
- Deliberate inaccuracies or incomplete statements will bar or remove you from further consideration for acceptance.
- All time periods in your background, unless otherwise specified, must be accounted for.

It is to your advantage to respond openly. Any negative factor in your background will be evaluated in terms of the circumstances surrounding its occurrence and consideration will be given to the degree of relevance it has to acceptance to the Law Enforcement Officer Basic Course.

Please print your responses to this questionnaire in ink. **Do Not** type on this form and do not have another person make entries for you. If a question does not apply to you write "N/A" in the space provided for your answer. If you need additional space to answer a question use a blank sheet of paper and attach it to this questionnaire. Remember to identify the additional information by the question number.

Please read the following waiver carefully and have your signature notarized before returning this packet to our office.

The contents of this questionnaire will be considered confidential and will be used only for investigating acceptance suitability with the Montana Law Enforcement Academy or another law enforcement agency in possession of a notarized permission waiver signed by you.

There is one exception to the confidentiality of your background investigation. Should it be discovered that you are currently involved in criminal activity or have committed an undiscovered felony the law enforcement agency having jurisdiction will be notified.

When completed return this questionnaire along with all attachments to:

Montana Law Enforcement Academy Attention: Ms. Beth Strandberg 2260 Sierra Road East Helena, Montana 59602

Any questions you may have regarding the completion of this packet should be directed to Ms. Beth Strandberg at (406) 444-9969. By signing this document you declare that you have fully read and understand the contents of this survey and understand that you waive and voluntarily disclose all of the requested information by authority of your previously submitted waiver.

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I have read and completely understand	the above statement.		
Signature of Applicant		Date	
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I. PERSONAL HISTORY REQUIRED DOCUMENTS:

1.	subm to the	nit these do Montana cable to yo	of the following documents, unless an original is requested. Failure to ocuments in a timely manner will delay your consideration for acceptance Law Enforcement Academy. Some of these documents may not be ou. Please indicate those that are attached with a check mark in the box
	a.		High School diploma or GED certificate.
	b.		Transcripts from colleges or universities.
	c.		Military discharge papers.
	d.		Citizenship or naturalization papers.
	e.		Copy of your birth certificate.
	f.		All marriage licenses and divorce decrees.
	g.		Name change documents.
	h.		Peace Officer Standards and Training Certificates.
	i.		Any other peace officer training certificates.

II. RELATIVES, REFERENCES, AND ACQUAINTANCES:

 During the course of the background investigation, people who know you will be asked to comment upon your suitability for attendance at the Montana Law Enforcement Academy. Inquiries will be confined to your ability to participate and perform in the activities at the Montana Law Enforcement Academy. We will be looking at matters relevant to your acceptance to the Montana Law Enforcement Academy.

Please supply all of the appropriate information in the spaces below. If a category is not applicable, write "N/A" in the space provided.

Name of Your	Address where person can be contacted including city, state, zip code	Telephone number where person can be contacted
Father	zip code	Contacted
Mother		
Father-In-Law		
Mother-In-Law		
Spouse		
Fiancé		
Former Spouse		
Brothers		
Diothers		
Sisters		
0.0.0.0		
Step-Father		
Step-Mother		
Step-Brothers		
•		
Step-Sisters		
•		
Sons		
Daughters		

Name	Address where person can be contacted including city, state, zip code	Telephone numbe where person car be contacted

2. List 3 to 5 individuals who have knowledge of you and your qualifications. You may list

3. List individuals with whom you have resided with within the past 10 years. Please exclude immediate family. Also, please exclude resident information prior to your 15th birthday.

Name	Address where person can be contacted including city, state, zip code	Telephone number where person can be contacted

4. List all of your residences during the past 10 years. Begin with your most current residence and proceed backwards. If a residence was rented provide the landlord's name, address and telephone number. List no information prior to your 15th birthday. Please include dates and information in which you resided with immediately family.

Address of Residence	Dates From – To	Landlord's Name/Address	Telephone number where landlord can be contacted

III. DRUG USE DISCLOSURE:

Drug Type	Yes	No	Date First Used	Date Last Used	Frequency of Use
Marijuana					
Hashish, Hashish Oil, or other cannabis products.					
Cocaine					
Crack, Rock, or Ice					
Barbiturates, Hypnotics, Downers					
Amphetamines, Cross Tops, Whites, Bennies, Uppers					
Methamphetamine, Crank, Speed					
LSD, Acid, Peyote other Hallucinogins					
PCP, Angel Dust, Sherm					
Heroin, other Opiates					
Steroids					
Illegal Pharmaceutical Drugs					
Pharmaceutical Drugs not prescribed to you					

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Questionnaire	Yes	No
Is there any other illegal drug, narcotic or controlled substance not listed above that you have introduced into your body?		
Have you ever introduced into your body a substance, which you thought was an illegal drug and then found out it was not?		
Have you ever injected an illegal drug into your body?		
Have you ever sold an illegal drug?		
Have you ever purchased any drug, narcotic or controlled substance other than by a doctor's prescription?		
Have you ever participated in the manufacturing, cultivation, or production of any illegal drug, narcotic or controlled substance?		
Have you acted as a courier by transporting any illegal drug, narcotic, or controlled substance?		
Have you ever acted as a middle man, go-between, or done a favor for a friend by becoming involved in any illegal drug transaction?		
Have you ever told anyone where to purchase any illegal drug, narcotic, or controlled substance?		
Have you ever temporarily stored or held any illegal drug, narcotic, or controlled substance?		
Have you ever had an illegal drug, narcotic, or controlled substance in your possession while at work?		
Have you ever bought or sold any illegal drug, narcotic, or controlled substance while at work?		
Are there any illegal drug, narcotic, or controlled substance presently in your possession, in your home, in your vehicle, or at work?		

	PERSONAL HISTORY:			
1.	Have you ever been fired or asked to resign from any place of employment?			
	Yes No			
	If "Yes" please give details to include when, name of employer and why.			
2.	Have you ever applied, successful or unsuccessfully, for another position with any enforcement agency?			
	Yes No			
	If "Yes" please provide the year and agency.			
3.	Have you ever served in the Armed Forces, National Guard or Military Reserves? Yes No			
3.	·			
3.	Yes No If "Yes" please supply the Branch of Service, service number, dates of service and			
3.	Yes No If "Yes" please supply the Branch of Service, service number, dates of service and			
3.	Yes No If "Yes" please supply the Branch of Service, service number, dates of service and			
	Yes No If "Yes" please supply the Branch of Service, service number, dates of service and of discharge. Have you ever filed for or declared bankruptcy?			

5.	Within the last seven years have your wages ever been garnished?
	Yes No
	If "Yes" please give details to include when, where and why.
6.	Within the last seven years have any of your bills ever been turned over to a collection agency?
	Yes No
	If "Yes" please give details to include when, firms involved and circumstances.
7.	Have you ever been delinquent on child support, income tax, or other tax payments? Yes No If "Yes" please give details to include when, where and why.
8.	Have you ever been arrested (taken into physical custody), been issued a misdemeanor citation (excluding traffic citations) or convicted of any crime.
	If "Yes" please give the date, arresting agency, location, charge and disposition.

9.	As an adult, have you ever been placed on probation by any court?
	Yes No
	If "Yes" please give details to include when, where and why.
10.	Are you now or have you ever been involved as a defendant in any civil court action? Yes No
	If "Yes", please give details to include when, where, name of the court and circumstances.
11.	Operation of a motor vehicle is an integral part of training at the Montana Law Enforcement Academy. An investigation of your driving history will be made through a records check. Please supply the following information:
	Driver's License Number State
	Exact Name as Printed on License Please list any other states where you have been licensed to operate a motor vehicle.
	i lease list arry other states where you have been licensed to operate a motor vehicle.

12.	Has your driver's license ever been suspended, revoked or restricted in any way?
	Yes No
	If "Yes" please give details to include when, where and under what circumstances.
13.	Have you ever been refused auto insurance for any reason other than failure to pay a premium?
	Yes No
	If "Yes" please explain including the company name, date, and reason.
14.	Are you now, or have you ever been a member of any foreign or domestic organization, association, movement or group of persons that is, or was, totalitarian, fascist, communist or subversive in nature or which has adopted or expressed a policy of advocating or approving the commission of acts of force or violence as a means to deny other persons their rights under the Constitution of the United States or which seeks to alter the form of government of the United States by unconstitutional means?
	Yes No
	If "Yes" identify the organization and explain fully.
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	Have you ever applied for a permit to carry a concealed firearm or other weapon?
	Yes No
	If "Yes" please indicate if the permit was granted and if so provide the date issued, Name the Law Enforcement Agency approving the permit and for what purpose the permit was issued.
	If the necessity arose in the course of your law enforcement duties to use deadly force on a human being would you have any reluctance to do so?
	Yes No
	If "Yes" please explain.
17. 	Do you have anything in your background that may disqualify you from becoming a peace officer in the State of Montana? Yes No
	If "Yes" please explain.